

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-870)

SEARCHED
APPLICANT/IN

FILING DATE

	AS FILED		AFTER SEARCH/EXAMINER		AFTER INTERVIEW		CLAIMS
	REG.	O.C.P.	REG.	O.C.P.	REG.	O.C.P.	
1			1				
2			1				
3			1				
4			1				
5			1				
6			1				
7			1				
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9			1				
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44			1				
45			1				
46			1				
47			1				
48			1				
49			1				
50			1				
TOTAL REG.			1				
TOTAL O.C.P.			10				
TOTAL REG. + O.C.P.			11				

	REG.	O.C.P.	REG.	O.C.P.	REG.	O.C.P.	REG.	O.C.P.
61								
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97								
98								
99								
100								
TOTAL REG.			1					
TOTAL O.C.P.			1					
TOTAL REG. + O.C.P.			2					